

bony portions of the dorsal scutes can be seen externally or better still by removing the horny cuticle which covers them; or when the skin is removed can be seen by transmitted light.

Since writing the above I have seen a note by Theobald of a specimen of *C. palustris* killed at Thayetmyo, on the Irrawadi (*J. Linn. Soc., Zool.*, x, 1868, p. 20). It was a full-grown specimen, 12 feet long, and had recently killed a man. He remarks that *C. palustris* is evidently very rare in Burma, as it is the only example he has ever seen.

Later in 1882 he wrote of *C. palustris* 'rare in Burma, but is found inland about Thayetmyo, and thence up the Irrawadi' (*Burma, Its People and Productions*, p. 335). Although in his writings Theobald confused *palustris* with *porosus* there can be little doubt, from the locality in which it was found, that the crocodile to which he refers was not *porosus*.

LONDON,
April 10, 1929.

MALCOLM SMITH.

XXIV.—NOTE ON A FORMOSAN VIPER (*TRIMERESURUS MUCROSQUAMATUS*) FROM THE NORTH-EAST FRONTIER

The Society recently received a fine example of a Formosan Viper (*Trimeresurus mucrosquamatus*) from Mr. J. N. Saikia, Medical Officer, Pasighat, N.-E. Frontier. The snake agrees with descriptions of Formosan specimens given by Boulenger in the *Fauna*, Brit. India, *Reptilia*. The costals are 23, two head lengths behind the head, and 25 in mid-body. Ventrals 200, Sub-caudals in 73 pairs. Length 3' 7". The colouration differs in that the lower parts are yellowish grey with irregular square-shaped white markings.

BOMBAY NATURAL
HISTORY SOCIETY,
April 15, 1929.

S. H. PRATER,
C.M.Z.S.

XXV.—RECORD OF SYMPTOMS AND TREATMENT OF A BITE FROM A FORMOSAN VIPER (*TRIMERESURUS MUCROSQUAMATUS*)

A forest cooly was bitten by the above named viper on the inner side of the left foot at about 3-30 P. M., on the evening of the April 10, 1929. The man walked 3½ miles to the hospital where he was admitted at about 6 P. M.

He complained of pain at the site of the bite and all over the limb and in the inguinal gland of the affected limb. The whole limb and the gland were swollen to about twice the size of the corresponding limb.

On examination (with a lens and naked eye as well) one puncture mark was noticed on the inner side of the left foot about midway